U.S. Patient and Trademark Of PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
CLAIMS AS FILED - PART I (Column 2).						SM	SMALL ENTITY		, .	OTHER THAM	
BASIC FEE (37 CFR 1.18(a))		MU	NUMBER FILED		D NUMBER EXTRA		RATE FEE			SMALL ENTIT	Ý
TOTA	L CLAIMS							TEE .		ATE FE	EE
INDE	FR 1.16(c)) PENDENT C	LAIMS .	minus	20 =		× \$			OR .		=
-	FŘ 1.16(b))		minus	3 =		<b>**</b>			OR X \$	== -	
	•-	IDENT CLAIM PRÉS		(37 CFR 1.16(d)		1 +			OR X \$	=	
• If the		CLAMA 10			nn 2.	TOTAL			OR TOT	EAL	
	,	CLAIMS AS AN	MENDED		·				OR TOT	Vr	
4	·	CLAIMS REMAINING	7	(Column 2)	1	SMAL	L ENTITY	, .	OR C	THER THAN.	
EN-		AFTER	ı	N⊍MBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADE		RAT	MALL ENTITY	ADDI
	Total 7 CFR 1.16(c)) dependent	4	Minus	20	=	x,25	FEE		<u>:</u>	TIONA	١L ·
$\Sigma$	CFR 1.16(b))	3	Minus	"3	=	×, 100	-	OF		==	
FIF	RST PRESEN	TATION OF MULTIPL	E DEPENDE	NT CLAIM (37 G	FR 1.16(d))	+, 180	-	OR	21	= -	
		(Column 1)				TOTAL ADD'L FEE		OR	TOTAL	<del>-</del>	
α		CLAIMS REMAINING	Т	(Column 2) HIGHEST	(Column 3)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Z	·	AFTER AMENDMENT	·	NUMBER PREVIOUSLY	PRESENT EXTRA .	RATE	ADDI-		RATE	ADDI-	-
) . (37 C	Total FR 1.16(c)) pendent		Minus	PAID FOR	=	-	FEE			TIONAL FEE	
(37 C	FR 1.16(b))				-	X \$=	<del> </del>	OR.	X \$	=	
FIRS	T.PRESENTA	TION OF MULTIPLE (	DEPENDENT	CLAIM (37 CFF	₹´1.16(d))	X \$=		OR	X \$	=	
						TOTAL ADD'L FEE		OR OR	+\$ =		4
	COMMS 1 - 1-11			(Column 2) HIGHEST	Column 2) (Column 3)			-J %'	ADD'L FEE	L	-
- I	: l.	REMAINING AFTER AMENDMENT	· PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL	7	RATE	· ADDi	$\frac{1}{2}$
(37 CFR	1.16(c))		linus			X \$ =	FEE	-		TIONAL FEE	
(31 CFR	.1.16(b))	,	inus   ***			X \$ =	<del></del>	OR .	X.\$=	<del>                                     </del>	
FIRST	PRESENTATI	ON OF MULTIPLE DE	PENDENT C	LAIM (37 CFR 1	. 16(d))	+ \$ =	<del></del>	ÖR	× \$=	<del> </del>	1
(the -	nin ile i	nn 1 is less than the ber Previously Pale	,			TOTAL . ADD'L FEE	<del></del>	OR	+ s =		1

""If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED EXPLICATION THESE.